



**Planning Department  
Code Enforcement Division  
Health Section**

1522 Texas Parkway  
Missouri City, Texas 77489  
**281-403-8566**

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**City of Missouri City  
HEALTH PERMIT APPLICATION**

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*PLEASE PRINT*

Business Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Shopping Center: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Estimated Date of Move in: \_\_\_\_\_

Business Hours: \_\_\_\_\_

Number of Employees (including all shifts) \_\_\_\_\_

List yourself and two emergency contacts:

1. \_\_\_\_\_ Phone #: \_\_\_\_\_

2. \_\_\_\_\_ Phone #: \_\_\_\_\_

3. \_\_\_\_\_ Phone #: \_\_\_\_\_

Building

Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

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CITY USE ONLY:

PERMIT FEE: \_\_\_\_\_ RECEIPT#: \_\_\_\_\_ ISSUE DATE: \_\_\_\_\_



## **Food Establishment Permit Fees City of Missouri City**

<b>1 to 4 employees.....</b>	<b>\$200.00</b>
<b>5 to 9 employees.....</b>	<b>\$300.00</b>
<b>10 to 25 employees.....</b>	<b>\$400.00</b>
<b>26 to 50 employees.....</b>	<b>\$500.00</b>
<b>51 to 100 employees.....</b>	<b>\$600.00</b>
<b>101 or more employees.....</b>	<b>\$700.00</b>
<b>Mobile Vending Units..... (1 inspection per year)</b>	<b>\$200.00</b>
<b>Day Care Centers (with kitchens).....</b>	<b>\$100.00</b>
<b>Day Care Centers (without kitchens).....</b>	<b>\$75.00</b>
<b>Non-profit Organizations.....</b>	<b>\$50.00</b>
<b>Pre-Opening Inspections..... (New Commercial or Change of Occupancy)</b>	<b>\$100.00</b>